



State of Indiana

Employee Health Benefits

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**State of Indiana Anthem Benefit Comparison
Summary of Benefits for 2012**

	CDHP 1		CDHP 2		Traditional PPO	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible						
Single	\$2,500		\$1,500		\$750	\$1,500
Family	\$5,000		\$3,000		\$1,500	\$3,000
Out-of-pocket maximum						
Single	\$4,000		\$3,000		\$2,500	\$5,000
Family	\$8,000		\$6,000		\$5,000	\$10,000
Office Visit	20%	40%	20%	40%	30%	50%
Inpatient	20%	40%	20%	40%	30%	30%
Emergency Room	20%	20%	20%	20%	30%	30%
Urgent Care	20%	20%	20%	20%	30%	50%
Wellness and Prevention	0% (No deductible)	40% (No deductible)	0% (No deductible)	40% (No deductible)	0% (No deductible)	50% (No deductible)

**Prescription Drug Summary
below applies to all three plans
CDHP 1, CDHP 2, Traditional PPO**

	Retail Rx (Up to a 30-day supply)	Mail Order Rx (Up to a 90-day supply)
	Standard co-pay	
Generic	\$10 co-pay	\$20 co-pay
Formulary	20% min \$30, max \$50	20% min \$60, max \$100
Brand (Non-Formulary)	40% min \$50, max \$70	40% min \$100, max \$140
Specialty	40% min \$75, max \$150 30-day supply	

Rates

Plan	Coverage	Minimum Monthly Employee Rate	Maximum Monthly Employer Rate	Total Monthly Rate	Early Retirees (Monthly)	COBRA (Monthly)	Minimum Annual Employee Rate	Maximum Annual Employer Rate	Annual Total Rate
CDHP 1	Single	\$66.45	\$332.26	\$398.71	\$398.71	\$406.68	\$797.42	\$3,987.10	\$4,784.52
	Family	\$88.44	\$1,046.33	\$1,134.77	\$1,134.77	\$1,157.47	\$1,061.32	\$12,555.92	\$13,617.24
CDHP 1	Single	\$12.28	\$332.26	\$344.54	\$344.54	\$351.43	\$147.42	\$3,987.10	\$4,134.52
W/ Non-Tobacco Use Incentive	Family	\$34.27	\$1,046.33	\$1,080.60	\$1,080.60	\$1,102.21	\$411.32	\$12,555.92	\$12,967.24
CDHP 2	Single	\$120.27	\$369.70	\$489.97	\$489.97	\$499.77	\$1,443.26	\$4,436.38	\$5,879.64
	Family	\$240.28	\$1,121.47	\$1,361.75	\$1,361.75	\$1,388.99	\$2,883.40	\$13,457.60	\$16,341.00
CDHP 2	Single	\$66.10	\$369.70	\$435.80	\$435.80	\$444.52	\$793.26	\$4,436.38	\$5,229.64
W/ Non-Tobacco Use Incentive	Family	\$186.11	\$1,121.47	\$1,307.58	\$1,307.58	\$1,333.73	\$2,233.40	\$13,457.60	\$15,691.00
Traditional PPO	Single	\$327.75	\$425.86	\$753.61	\$753.61	\$768.68	\$3,933.02	\$5,110.30	\$9,043.32
	Family	\$815.53	\$1,233.76	\$2,049.32	\$2,049.32	\$2,090.31	\$9,786.40	\$14,805.44	\$24,591.84
Traditional PPO	Single	\$273.58	\$425.86	\$699.44	\$699.44	\$713.43	\$3,283.02	\$5,110.30	\$8,393.32
W/ Non-Tobacco Use Incentive	Family	\$761.36	\$1,233.79	\$1,995.15	\$1,995.15	\$2,035.05	\$9,136.40	\$14,805.44	\$23,941.84



What can be customized?

- Eligibility - School corporations can define eligible employees as full-time, part-time or a minimum number of hours/per week.
- The rate split – School corporations shall not pay more than the state; the school corporation employee shall pay at least the amount paid by a state employee.
- Contributions to an HSA - Your school can decide if you will contribute, how much you will contribute and which financial institution(s) you will use.

Example of State of Indiana employer contributions to State employee HSAs for 2012

HSA Accounts	Coverage	Initial Contribution	Bi-Weekly Contribution	Monthly Contribution	Maximum Annual Employer Contribution
HSA 1	Single Family	\$561.60	\$21.60	\$46.80	\$1,123.20
		\$1,124.76	\$43.26	\$93.73	\$2,249.52
HSA 2	Single Family	\$336.96	\$12.96	\$28.08	\$673.92
		\$673.92	\$25.92	\$56.16	\$1,347.84



What cannot be changed?

- Plan design. The plan designs set by the state are offered to all participants where available.
- All benefit-eligible employees in your school corporation must be included. You cannot split out employees by classification/groups.
- Definition of a dependent.



Who is an eligible dependent?

- Spouse: One's wife or husband.
- Children: Natural, step-, foster-or legally adopted children, children for whom the employee or spouse have been appointed legal guardian or awarded legal custody by a court, under the age of 26.
- Dependent Children Age Limit: Until their 26th birthday.
 - If the dependent is both incapable of self-sustaining employment by reason of mental or physical disability and is chiefly dependent upon the employee for support and maintenance prior to age 19, the dependent child's coverage shall continue if satisfactory evidence of such disability and dependency is received within 120 after the maximum age is attained. Coverage for the dependent will continue until the employee discontinues his coverage or the disability no longer exists.



What are the fees?

- The Information Fee (similar to a monthly premium) plus \$1.26 per employee per month for COBRA administration.



How will the plan be administered?

- The insurance carriers will:
 - Send billing inquiries and adjustments.
 - Administer COBRA.
- School corporations will administer HIPAA and FMLA.



When will benefit eligibility begin and end?

- Annual Open Enrollment will occur at the same time as the Open Enrollment for state employees.
 - Benefit changes will be effective January 1st
- Newly hired and eligible employees' benefits will be effective the first of the month following their date of hire.
- Terminated employees' benefits will end on the last day of the month in which they separate employment.



How will enrollment information be communicated?

- Group Benefit Coordinator responsibilities:
 - Communicate benefit options and other annual enrollment information for current and new employees
 - State Personnel Department will provide any updated plan information to the Group Benefit Coordinator for annual enrollment
 - Complete enrollment of current and new employees on the medical plans
 - Update carriers with eligibility information
 - Inform group payroll department of benefit adjustments



How to get started

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State Personnel Benefits

Benefit Web site for School Corporations

<http://www.in.gov/spd/2589.htm>

Benefit E-mail

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